10/31/2002. OMB 0651-0031 PARTMENT OF COMMERCE lays a valid OMB control number

Docket Number (Optional) 014058-008010US

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

In re Application of SKEIKY and GUDERIAN Filed October 6, 2006 Application Number 09/684,215 METHODS OF USING A MYCOBACTERIUM TUBERCULOSIS CODING SEQUENCE TO FACILITATE STABLE AND HIGH YIELD EXPRESSION OF THE HETEROLOGOUS PROTEINS

		Group Art Unit	Liu, Samuel Wei		.R 1800/2900		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):							
	One month (37 CFF	R 1.17(a)(1))		\$			
] Two months (37 CF	R 1.17(a)(2))		\$			
۵	Three months (37 C	CFR 1.17(a)(3))		\$930			
	Four months (37 C	FR 1.17(a)(4))		\$			
	Five months (37 CF	R 1.17(a)(5))		\$			
 Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount sh above is reduced by one-half, and the resulting fee is: \$ 465. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. 					vn		

The Commissioner is hereby authorized to charge any fees which may be required, \boxtimes or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record.

☑ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). 48,631.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

February 26, 2003

Signature

Date

Carol A. Fang, Reg. No. 48,631

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

forms are submitted. ☐ *Total of

Burden Hour StateLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. SF 1436543 v1

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